

MEDICAL MIRACLES: MINIMALLY-INVASIVE SHOW

SUBMITTED VERSION A

9/07/07

TIMED.....TO 28:26

Medical Miracles: Minimally Invasive SHOW

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VIDEO

AUDIO

	SEGMENT 1	SEGMENT 1	
1	Graphic: CCF Disclaimer	(ANNOUNCER'S VOICE) The following program is sponsored by the Cleveland Clinic.	:10
2	<i>OPENING MONTAGE GRAPHICS</i>	<i>MUSIC UP</i>	:06
3	Dr. Morris stands up...	(Monica's Voice) Imagine standing... four hours after hip surgery.	:05
4	Dr. Morris on camera	Dr. Morris: "What did you say? Is that possible?"	:02
5	Shot of robot	(Monica's Voice) Imagine repairing a heart with a robot?	:05
6	Dr. Mihaljevic on camera	Dr. Mihaljevic: "They actually allow us to do a better job on a human heart."	:04
7	Shot of Dr. Geisler in surgery.	(Monica's Voice) Imagine surgery that can remove tumors without a large incision.	:07
8	Dr. Geisler on camera	Dr. Geisler: "...and essentially send the patient home the next day without any incisions on their belly. Without any pain or discomfort and essentially not knowing they had a procedure."	:08
9	Patient shots	(Monica's Voice) It is all possible because of minimally invasive surgery.	:05

10	Dr. Barsoum on camera	Dr. Barsoum: “The real advantages that we have seen with minimally invasive approaches is a slightly quicker return to function, less time in the hospital, a smaller incision, and a little bit less pain.”	:10
11	Surgery shots	(Monica’s Voice) Regardless of what type of surgery, surgeons know they have to get the job done right.	:08
12	Surgeons at work	Dr. Mihaljevic: “It is a job that matters because we save lives or we improve lives. It is a very dynamic job.”	:08
13		MUSIC SWELLS	:05
14	Monica on camera. In Tunnel area of Clinic Super: Monica Robins WKYC Health Anchor	(Monica’s Voice) Hello, I’m Monica Robins and welcome to another edition of Medical Miracles. Today, we will experience how, cutting edge, minimally-invasive surgery is changing the future of medical care. Smaller incisions and special tools heal patients faster and with less pain. Patients return home quickly and get back to their normal lives. Minimally-invasive surgery is now the preferred method of both patients and surgeons alike.	:31
15		MUSIC UP:	:02
16	Morris on camera: Super Dr. Michael Morris Psychologist	Morris: “I tell my people myself in my sessions of all ages, for mental health and emotional stability, exercise is important.”	:09

17	<p>Dr. Morris walking in his house with the aid of a cane.</p> <p>Working at the dining table in his home.</p>	<p>(Monica’s Voice)</p> <p>Dr. Michael Morris is a psychologist. He has enjoyed his profession for 35 years. Right now he is in pain. His right hip is bothering him. Walking is becoming a problem as well as his concentration.</p>	:15
18	<p>Morris on camera:</p>	<p>Morris: “Sleep is tough, sleep is interrupted. It is not what it should be, what it could therefore that affects other aspects of your day too, if your sleep is not good. It is time to do something.”</p>	:12
19	<p>Dr. Barsoum on camera</p> <p>Super: Wael Barsoum, M.D. Orthopaedic surgeon</p>	<p>Dr. Barsoum: “The first time I ever met Dr. Morris he actually had two bad hips. One significantly worse than the other, so a couple of years ago, we actually replaced his first hip.</p>	:09
20	<p>Morris at home</p>	<p>(Monica’s Voice)</p> <p>Dr. Morris put off the surgery on the second hip. As the pain increased his eagerness to repair the second hip grew.</p>	:09
21	<p>Shot of xray before surgery.</p>	<p>Dr. Barsoum: “We see here on this hip, a number of different things. Normally this ball should be nice and round, you see in this case, that it is really more shaped like an egg it is oblong.”(cut to) “what we really have now is a square peg in a round hole, so it doesn’t work very well and that is what causes so much pain.”</p>	:16
22	<p>Morris at home</p>	<p>(Monica’s voice)</p> <p>Dr. Morris realized that the hip pain was affecting his life and his family.</p>	:06

23	Rachel on camera Super: Rachel Morris Wife	Rachel: “You know just enjoyment of the simple things of life he hasn’t been able to do that. So to be pain free, I think would be wonderful for him. I’m sure it will change his life.	:13
24	Dr. Barsoum on camera	Dr. Barsoum “Hip replacement is done for quality of life. It is not done for any other reason. If your quality of life suffers, it is a reasonable option to consider if in fact you are a candidate.	:09
25	Dr. Barsoum in surgery	(Monica’s voice) Dr. Morris decides to have orthopaedic surgeon Dr. Wael Barsoum repair his hip using a minimally invasive technique that promises to put the psychologist back on his feet quickly.	:09
26	Dr. Morris on camera	Dr. Morris: “I got to get back to work, my work is important but just being a worker bee type that is important, I got to get back. I got to get back to work for a lot of reasons.”	:06
27	Kisses wife goodbye before surgery	- NAT SOUND -	:02
28	Dr. Barsoum in surgery	(Monica’s voice) The surgery begins...	:02
29	Dr. Barsoum talks during the surgery	Dr. Barsoum (in surgery): “This gentleman was born with what is called developmental hip dysplexia, meaning that the ball of his hip joints were not appropriately covered by the socket.”	:11

30	Surgery shots	(Monica's voice) In the United States today, the average orthopaedic surgeon performs about 20 hip and knee replacements a year. Dr. Barsoum performs close to 400. In one year, he will perform as many surgeries as the average orthopedic surgeon does in 20 years.	:18
31	Dr. Barsoum in surgery	Dr. Barsoum (in surgery): "The whole idea behind this, is the less soft tissue damage we do, hopefully the patient will have less pain and will be able to recover quickly."	:10
32	Shot of ceramic joint Or animations	(Monica's Voice) Ceramics is the secret to longevity in a new hip replacement. The smooth surface will not cause as much friction and that will take away the pain.	:11
33	Dr. Barsoum in surgery. Showing ceramic socket	Dr. Barsoum (In surgery): "This is actually similar to porcelain, same thing you put in your oven."	:05
34	Surgery video	(Monica's Voice) By carefully twisting and turning the leg, Dr. Barsoum can replace the hip using a small incision. Dr. Barsoum replaces the femur head with a new artificial one, corresponding to the new socket joint.	:16
35	Dr. Barsoum in surgery	Dr. Barsoum (in surgery): "And we are done...we'll go ahead and close everything up, better than new."	:05
36	Surgery video Morris getting up out of bed.	(Monica's Voice) In an amazing forty-five minutes, Dr. Morris has a new hip. And even more amazing, he will be up on his feet in four hours.	:11

37	Morris out of bed	Dr. Barsoum: “After those first few hours after surgery, the patient is able to stand up and walk around, really with very little pain at all.”	:07
38	More of Morris out of bed	Dr. Morris: “With some coaching, it was very doable. I was surprised myself.”	:09
39	More Morris walking just after surgery	Dr. Barsoum: “You want a patient to be comfortable the first time they get up, because if they are scared or they feel pain, then the next time they get up they are going to be challenged. It is very important that they are comfortable.”	:08
40	Physical therapist with Morris	(Monica’s Voice) The success of any hip replacement patient involves more than the surgeon. Physical and occupational therapists play a major role in getting patients back up on their feet.	:14
41	X-ray of post surgery	Dr. Barsoum (with xray): “We’ve got a nice round cup, sitting in the socket, right where it is supposed to be.”	:04
42	Morris walking in his office	- NAT SOUND -	:02
43	Morris walking in his office then standing in the hallway.	Dr. Morris (standing): “I was back here in the office, in two and a half weeks, so, yeah, from the day of surgery to two weeks was like incredible amount of recovery for that short of period of time, because at two and a half weeks I was back in here, in the office.”	:16
44	Morris at his desk.	(Monica’s Voice) Dr. Morris is back at his practice and seeing patients.	:05

45	Morris on camera	Dr. Morris: “I guess the hardest part was just saying are you ready to do this, are you ready to do this? How much more can you do this? The hardest part was saying, okay now it’s time.”	:09
46	Dr. Barsoum on camera	Dr. Barsoum: “The one thing I hear over and over from my patients is I wish I had done this earlier. If you are a good candidate, don’t be scared, see your doctor and think about it.”	:09
47	Morris on camera	Dr. Morris: “It really is not a decision that needs to be in the head so much, its more in the hip and just go ahead and make the decision and things flowed very well, very well.”	:10
48	Dr. Barsoum on camera	Dr. Barsoum: “A hip replacement is a mechanical device. It will eventually wear out, so the more you use it or the more you abuse it, the quicker it will wear out. My guess is for Dr. Morris, is that his hip will last him at least 20 years if not 30 or 40. Because of the type of hip that he has. Nonetheless the more you use your hip the quicker it will wear out. So, you have to be careful of the fact that although you maybe able to do something, maybe you shouldn’t.”	:25
49	Morris mowing the lawn.	(Monica’s voice) In a month’s time, Dr. Morris was mowing the lawn. He’s not worried about wearing out his hip cutting the grass.	:11
50	Morris mowing his lawn.	Dr. Morris: “At five weeks now I have mobility, more flexibility more stamina just standing just on my own two feet than I did for a lot of months before surgery. And here on out it is just all bonus and a blessing.”	:16

51	DIP TO BLACK	MUSIC FADES OUT	:03
52	CLOSING BUMP UP:	CLOSING BUMP UP:	:02
53	GRAPHIC:	(MONICA’S VOICE) Coming up:	:27
	Anita on camera	Anita: “I would do it again. I was really scared and apprehensive but I am glad that I did it.”	
	Robotic surgery video	(Monica’s Voice) The word robotic surgery may scare some but the advancement in surgery assures a surgeon’s steady hand. And later...	
	Katie on camera	Katie: “It is nothing, easy, you know, it is hard to deal with any disease and cancer is one of the big ones so it is hard.”	
62		FADE OUT	:03
63		CCF COMMERCIAL	:30
		SEGMENT TIME:	8:48
64	COMMERICAL BREAK #1	COMMERCIAL BREAK #1	1:02
		RUNNING TIME	9:50

FADE UP:

65	OPEN BUMP	OPEN BUMP	:06
66	Monica in Surgery Center Super: Monica Robins WKYC Health Anchor	(MONICA ON CAMERA) The heart is a complicated organ. The repair of the heart was once thought impossible and incredible risky but now it is common and very safe. Robotic surgery makes it even safer by taking the slightest tremor out of surgeon's hand; easing the minds of both patient and physician.	:20
67	Constance on camera Super: Anita Hajec	Anita: "She just asked me and she just said did anybody ever tell you, you had a heart murmur and I said, I never had a heart murmur."	:05
68	Home video of Anita	(MONICA'S VOICE) Anita Hajec went for a routine physical and found out she had a heart murmur. At the time, it did not seem serious.	:08
69	Dr. Mihaljevic on camera Super: Tomislav Mihaljevic, M.D. Cardiovascular Surgeon	Dr. Mihaljevic: "Often times those murmurs are secondary to very mild dysfunction of heart valves and an operation is not necessary in those cases. Actually the majority of the patients who have heart murmurs do not need to have heart surgery."	:12
70	Anita feeding birds	(Monica's Voice) Anita was not phased by the discovery of her heart murmur.	:04
71	Jamie Hajec on camera Super: Jamie Jajec Husband	Jamie: "She's a ball of energy. Can't sit down. She loves the outdoors. You can see by the bird feeders out there, she likes to feed the birds and she just likes the outdoors, period."	:13
72	Anita resting (home video)	(Monica's Voice) The always active Anita began to slow down.	:03

73	Anita on camera	Anita: “I thought it was my asthma...was making me winded. I would take my inhaler and it wouldn’t get any better so, I figured it wasn’t. So, then I went back to the doctor to have my heart checked again. They said it was pretty bad.”	:19
74	Dr. Mihaljevic on camera	Dr. Mihaljevic: “Her valve condition was very severe, so on the scale to one to 4 her mitral regurgitation was 4.”	:05
75	Anita resting (home video)	(MONICA’S VOICE) For patients who have severe mitral regurgitation, like Anita, the diagnosis signals heart failure down the road. Her heart can not tolerate this condition for a very long period of time.	:14
76	Jamie on camera	Jamie: “She was getting winded and more tired over the past year, maybe a little longer and of course by then she knew something was wrong...”	:14
77	Anita on camera Home video	Anita: “As I was getting out of breath and finding it more difficult to do the things that I like to do...that had a big part on it...I didn’t want to drop dead one of these days and leave my family.”	:17
78	Dr. Mihaljevic on camera	(Monica’s Voice) Anita decided to have her valve repaired by surgeon, Dr. Tomislav Mihaljevic.	:05
79	Anita on camera	Anita: “I have one granddaughter now and I have two more on the way, and I needed to do this because I want to see them and spend my life with them. So, I had to do it. That’s who I did it for.”	:16
81	Surgery video	(Monica’s Voice) Anita learned that her mitral valve will be repaired using robotic surgery.	:05

82	Dr. Kaouk on camera Super: Jihad Kaouk, M.D.	Dr. Kaouk: “Patients who hear about robotic surgery have the concept that this is a more advanced, a more precise, technology that they would like to do.”	:10
83	Surgery video	(Monica’s Voice) Minimally invasive robotic surgery does not require the breast bone to be cut.	:04
84	Anita on camera	Anita: “I didn’t want to be sliced down the middle of my chest.	:03
85	Jamie on camera	Jamie: “The only think I knew about heart surgery, was that they would go in from the front, didn’t know they could go in from the side.”	:08
86	Surgery video	(Monica’s Voice) Through a small incision of 2 to 2 ½ inches on the side of the chest, the surgeon is able to perform the surgery.	:09
87	Animation	(Monica’s Voice) Dr. Mihaljevic uses a DaVinci robot to perform mitral valve repair. The system consists of two parts. At the console, the surgeon uses his fingers to manipulate the tools located on a “tower” placed alongside the patient. The tools are put in position by surgical assistants and the surgeon performs the surgery from across the room.	:23
88	Dr. Mihaljevic on camera	Dr. Mihaljevic: “We can accomplish the same quality of result through much smaller incision, much less trauma to the patient. All of that translates into faster recovery. Shorter absence from work. Quicker return to regular activities. And that’s the reason why we do minimally invasive operations.”	:16

89	Dr. Kaouk on camera	Dr. Kaouk: “The pain requirement throughout this period is significantly less. Cosmetically it is better. Risk for hernias, since the incisions are smaller, is less. So all of these are confirmed advantages of minimally invasive approach, compared to open.”	:15
90	Surgery video	(Monica’s voice) Using the controls on the console, the surgeon can make tiny and precise movements that would be more difficult with the human hand.	:11
91	Surgery video	Dr. Mihaljevic: “These instruments are so refined and they allow us to perform the operation with such a great precision and by using the special camera that gives us a three dimensional image of the operating field, we have just a superb visualization of the heart, so we can do really, really complex very precise work without really needing to make a big incision on a chest.”	:19
92	Surgery video	(Monica’s Voice) Repairing the valve becomes a routine operation. For surgery on the mitral valve, the risk to a patient’s life is lower than any surgery performed at the Cleveland Clinic Heart Center. The risk is less than .1 percent.	:17
93	Surgery video Dr. Mihaljevic on camera	Dr. Mihaljevic: “Which is extremely trivial. It comes as close to zero as it is possible in our line of work.” (cut to) “I do about 400 operations a year. That translates into about thirty-five a month.”	:15

94	Surgery video	- NAT SOUND -	:02
95	Dr. Kaouk on camera	Dr. Kaouk: “Robotics by itself does not hold the surgeon’s hand rather it just follows the command of the surgeon.”	:07
96	Surgery video	(Monica’s voice) In the future, the robot may take a more active role in surgery.	:06
97	Dr. Kaouk on camera	Dr. Kaouk: “We are talking now about navigational systems where the machine talks to you.”	:05
98	Surgery video	(Monica’s voice) And the navigational systems will show the surgeon where a cancer is located. Right now, heart surgeons can enjoy the benefits of the current system.	:13
99	Dr. Mihaljevic on camera	Dr. Mihaljevic: “Patients who undergo a successful mitral valve repair, usually have excellent long term results and long term results we are talking twenty, thirty years down the road.”	:09
100	Anita on camera	Anita: “My surgery was Wednesday. I was in ICU Thursday and Friday. Saturday I went up to a room and Sunday I was home.”	:10
101	Dr. Mihaljevic on camera	Dr. Mihaljevic: “Well, we don’t consider it a miracle. We consider it as a result that we were hoping to accomplish. And we can accomplish it in a majority of patients. If you were to ask me the same question ten years ago, it would have been a miracle. (cut to) ...it’s just another day in the office for us.	:13

102	Jamie on camera Anita with her feeders	Jamie: “Knowing Anita the way I do this will all be behind her. (cut to) She’ll be just back at her bird feeders, back to work and a ball of energy like she always been.”	:11
95	DIP TO BLACK	MUSIC FADES OUT	:03
96	CLOSING BUMP UP:	CLOSING BUMP UP:	:03
97	GRAPHIC: Don on camera	(MONICA’S VOICE) Next: Don: “At this point, or any point in my life, that was always the hardest thing if I...because of me my children feel bad.”	:21
	Don being wheeled into surgery.	(MONICA’S VOICE) One man’s personal fight against the second leading cause of cancer deaths in the United States.	
98	FADE OUT:	FADE OUT:	:03
99	CCF COMMERCIAL	CCF COMMERCIAL	:30
		SEGMENT TIME:	7:43
100	COMMERCIAL BREAK #2	COMMERCIAL BREAK #2	1:02
		RUNNING TIME:	18:34

	SEGMENT THREE	SEGMENT THREE	
101	TITLE GRAPHIC	MUSIC	:10
102	Monica on camera In garden setting. Super: Monica Robins WKYC-TV Health Anchor	MONICA ON CAMERA: The number two cause of cancer deaths in the United States is colon and rectal cancer. Your diet, lifestyle and even your heredity can play a role in whether you develop rectal cancer. It is a squeamish topic...but rectal cancer is serious business.	:19
103	Patty on camera Super: Patty Vasil	Patty: "He is very giving and very loving and he's great with his kids, there's ten nieces and nephews and he gets along with everybody. He's very bright, you know, was very successful in his job, yeah...he's got a lot of good friends."	:16
104	Video of Don at home	(Monica's Voice): Don Zagorski managed municipal water plants for twenty years. After a series of strokes he was forced to retire. At 56, he began to face the toughest times of his life.	:13
105	Don Zagorski on camera Super: Don Zagorski	Don: "One day, I started having difficulty breathing...(cut to)...the diagnosis at the time was that I was in congestive heart failure."	:12
106	Don at home	(Monica's voice) His doctors were able to control his heart condition. However, something was not quite right.	:07
107	Don on camera	Don: "I started to have some bleeding. I was losing blood, I was very weak, and uh, eventually my breathing difficulties came back."	:13

108	Dr. Geisler on camera Super: Daniel Geisler, M.D. Colorectal Surgeon	Dr. Geisler: “He had very mild bleeding, nothing more than that. Unfortunately, with cancers of the colon and rectum, most of them don’t show symptoms until it is very late.”	:08
108	Patty on camera	Patty: “So when he went back into the emergency room they wanted to see exactly what it was, and they did a colonoscopy and that is how they found it.”	:08
109	Dr. Geisler and Don in the office	(Monica’s voice) What they found was cancer. A biopsy confirmed that there was a cancerous tumor in Don’s rectum.	:08
110	Patty on camera	Patty: “When he found out on Good Friday, he told us on Easter Sunday, my sister and I that he had the cancer and initially of course we cried because my father died of cancer, so immediately you think that somebody’s going to die, that’s your immediate reaction, oh my God, they are going to die.”	:19
111	Joy in exam room	Dr. Geisler: “It is always tough for the patient and their family when they get the new diagnosis of a cancer, whether it is a rectal cancer or a colon cancer. The first thought is fear that the cancer spread elsewhere. We do put them through a thorough work up as we did in Mr. Zagorski’s case. ”	:15
112	Dr. Geisler and Don in office	(Monica’s voice) Untreated the tumor would continue to grow and at some time perforate through the walls of the rectum and start spreading to the local lymph nodes and finally to the liver and the lung.	:14

113	Dr. Geisler on camera	Dr. Geisler: “Fortunately, we see this looks like it was caught early enough that that’s not going to be the case. With that said he is going to require close following over the next couple of year’s time to be sure that this tumor doesn’t come back.”	:12
114	Don with his daughter.	(Monica’s Voice) Don faces the prospect of his cancer calmly.	:05
115	Don on camera	Don: “I have a positive attitude, I feel real good about beating this.”	:06
116	Animation	(Monica’s Voice) Dr. Daniel Geisler recommends a TEM procedure for Don. TEM stands for Trans-Anal-Endoscopic-Micro-Surgery. It is a minimally invasive procedure introduced in the 1980’s in Germany. Only a handful of centers in the United States use the technology. The minimally invasive surgery benefits patients in many ways.	:33
	Surgery video	Less pain and discomfort than traditional surgery and no need for either a permanent or temporary stoma pouch.	

117	Animation	<p>(Monica’s voice)</p> <p>The centerpiece for the TEM surgery is the scope. It is 20 centimeters in length. The length allows access to tumors further up the colon. An operating face plate and specialty instruments allow the surgeon to dissect these tumors from their surroundings and take them out without disturbing the tumor.</p> <p>A large tumor was removed from Don. It was sent to the lab to check and see if the cancer was spreading.</p> <p>As a pre-caution, Don will undergo further chemotherapy treatment to insure all the cancer has been removed from his body.</p>	:40
118	Dr. Geisler in surgery	<p>Dr. Geisler (in surgery): “The procedure itself went fine, he had a rather large tumor and we did take out a lot of tissue. Where it is located he will have a very quick recovery, with minimal to no discomfort from this.” (cut to)</p> <p>“Month from today, hopefully he is as strong as he was a month ago and quite frankly possibly better now that this tumor is gone and any bleeding he was having from the tumor should be gone as well with the surgery.”</p>	:27
119	Don with his sister	<p>(Monica’s voice)</p> <p>A month has gone by and Don is feeling good.</p>	:04
120	Don on camera	<p>Don: “I’m happy with the results and I went through it, pretty much, opened minded, positive thinking and I didn’t have much physical or emotional stress.”</p>	:19

122	Don with Patty	(Monica's voice) Don's sister Patty views the unexpected discovery of the rectal cancer, a blessing. The early discovery and surgery saved his life.	:10
123	Patty on camera	Patty: "I never felt that he was never going to come out of it okay. I never had that fear."	:04
124	Dr. Geisler on camera	Dr. Geisler: "One of the blessings of this surgery is that it does avoid even a temporary stoma bag and that is truly the case in Don's issue as well."	:08
125	Patty and Don	Patty: "I felt real positive about the whole thing. That he was going to pull through that. Dr. Geisler was going to do what he said he was going to do, he gave him all the options that he had, both him and I, all of us said, it is not us, but we would do the same thing and it really did, I just was amazed that we were so calm with it."	:20
126	Patty and Don together	Don: "I'm still here, walking and talking."	:04
127		MUSIC UP FULL:	:02
128		DIP TO BLACK	:02
129		MUSIC UP FULL:	:02
130		FADE OUT:	:03
131		CCF COMMERCIAL	:30
		SEGMENT TIME:	6:30
132	COMMERCIAL BREAK #3	COMMERCIAL BREAK #3	1:02

RUNNING TIME: 26:06

133	SEGMENT FOUR TITLE GRAPHIC	SEGMENT FOUR MUSIC	:06
134	Monica on camera Lerner location Super: Monica Robins WKYC Health Anchor	(MONICA ON CAMERA) Minimally invasive surgery is becoming the norm. It allows for less pain and quicker recovery. Both surgeon and patient love that idea.	:13
135	Katie on camera Super: Katie Zagorski	Katie: “When you hear about surgery, you hear about weeks, even months of recovery and they are saying a couple of days. IT is amazing what they can do now.	:07
136	Dr. Kaouk on camera Super: Jihad Kaouk, M.D.	DR. KAOUK: “The interest really is, One, that you are excited about providing something new and having an impact on how surgery is being done and the other side you are really excited by having patients, you know, recovery quickly and minimize their pain.”	:17
137	Dr. Mihaljevic on camera Super: Tomislav Mihaljevic, M.D. Cardiovascular Surgeon	DR. Mihaljevic: “At the end of the day, when we come home we know what we accomplished that day. It is just a great sense of accomplishment that keeps us in this field. We know that we save lives every day. But we, carry this responsibility on our shoulders 24 hours every day during the week. So, it is a great profession to be in.”	:22
138	Dr. Geisler on camera Super: Daniel Geisler, M.D. Colorectal Surgeon	DR. GEISLER: “Do I sweat at times? Yes. I think that anyone who enjoys what they do and works hard are going to have those days. With that it is a pure pleasure to see how well the patient does if you sweat a little for him.”	:14

139	Morris on camera: Super Dr. Michael Morris Psychologist	DR. MORRIS: “It is what it is, the description is in the seeing and the doing. A terrific procedure.”	:08
140	Dr. Barsoum on camera Super: Wael Barsoum, M.D. Orthopaedic surgeon	DR. BARSOUM: “I think more than anything else, I’d love to be able to take away the fear that patients have before their procedures. I think more than anything else, that is what keeps people from having things done that can really improve their quality of life.” (cut to) “If we could take away fear, I think a lot of people would have procedures done and would really feel a lot better.”	:20
141		MUSIC FADES OUT:	:05
142	<u>GRAPHIC</u> www.wkyc.com Call 866-819-8326	(MONICA'S VOICE): If you'd like more information log onto wkyc.com or call 866-819-8326.	:11
143		MUSIC/CREDITS	:20
144	FADE TO BLACK	FADE TO BLACK	:05
		SEGMENT TIME:	2:20
		RUNNING TIME:	28:26